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INTER-AFRICAN AFFAIRS

OCCGE CONFERENCE ENDS, COMMUNIQUE RELEASED

Cotonou EHUZU in French 21 Dec 79 pp 1, 8

[Text] The 26th OCCGE (Organization for the Coordination and Cooperation in the Control of Major Endemic Diseases in West Africa) Inter-Country Ministerial Conference completed its work yesterday in OCAM Village, Cotonou. At the conference, comrade Issifou Bouraima, our minister of Public Health, was declared president of this social institution for 1 year.

Also, the post of deputy secretary general of OCCGE, which had been unfilled for 9 years, was assigned to our fellow-countryman, 53-year old Dr Gabriel Aubenas, a general doctor, previously director of Sanitation in the Ministry of Public Health.

During this 26th session, the conference studied financial questions. The 1980 fiscal year OCCGE budget was closed at 871,662,558 CFA francs for receipts and expenditures, compared with 790,693,728 in 1979. There is thus a 10 percent increase. Likewise, the financial indicator level for the 1981 fiscal year was fixed at more than 7.5 percent. With respect to organizational reforms for administrative dossiers and for technical and other matters, various provisions were made to implement in 1980: the Tuberculosis Antenna of Nouakchott (Mauritania); the Meningitis and Schistosomiasis Research Center in Niamey (Niger); and in Lome (Togo), the Research Unit on Nutrition in the Forest Zone.

Also, new work conditions were defined for the Entomological Antenna of Cotonou, Benin.

Reconversion regarding onchocerosis was also started with respect to the Bouake (Ivory Coast) IRO [Institute for Research on Onchocerosis].

The 26th OCCGE Inter-Country Ministerial Conference planned personnel training for 1980.

At the close of the conference, a final communique was released.

Final Communique

Preceded by a meeting of experts from 10 to 14 December 1979, the 26th Organization for Coordination and Cooperation in the Control of Major Endemic Diseases in West Africa (OCCGE) Inter-Country Ministerial Conference was held from 17 to 20 December 1979 in Cotonou, People's Republic of Benin, under the respective chairmanship of their excellencies:

- Doctor N'Golo Traore, minister of Public Health and Social Affairs of the Republic of Mali; outgoing president of the Administrative Council;

- Commandant Issifou Bouraima, minister of Public Health of the People's Republic of Benin; incoming president of the Administrative Council.

The delegations of the member countries that participated in the work of the conference were headed by:

- His excellency, Commandant Issifou Bouraima, minister of Health and representative of the People's Republic of Benin;

- His excellency, Minister of State Jean-Baptiste Mockey, minister of Public Health and Population, representative of the Republic of the Ivory Coast;

- His excellency, Doctor Tinga Douamba, minister of Public Health, deputy vice chairman of the OCCGE, representative of the Republic of Upper Volta;

- His excellency, Doctor N'Gogo Traore, minister of Public Health and Social Affairs, representative of the Republic of Mali;

- His excellency, Doctor Diagana Youssouf, minister of Public Health and Social Affairs, representative of the Islamic Republic of Mauritania;

- His excellency, Mamadou Diop, minister of Public Health, representative of the Republic of Senegal.

- His excellency, Hoblado Bodjona, minister of Public Health, representative of the Togolese Republic;

- Doctor Alfa Cisse, director of Hygiene and Mobile Medicine, representative of the Republic of Niger;

- General Doctor Henri Journiac, inspector in the Department of Public Health and Social Action, in the French Ministry of Cooperation, representative of the French Republic.

The council considered and studied all of the items in the four categories scheduled for its agenda, namely:

- 1) The general category regarding management in 1979.
- 2) The financial category.
- 3) The administrative category.
- 4) The technical category.

During its work, the council:

- a) - Ascertained in particular the satisfactory results of the 1978-1979 management of the organization;
- b) - Gave its opinion regarding further developments and intensification of certain of the organization's research units;
- c) - Approved the organization's budget for the 1980 fiscal year, closed at 871,662,568 CFA francs for receipts and expenditures.
- d) - Proceeded to the appointment of certain managerial and research personnel in the organization;
- e) - Adopted the plans enumerated below:
 - Revision of the Cooperation Agreement of the OCCGE/French Association of Raul Follereau Foundations;
 - The agenda for the 20th Technical Conference;
 - The program for the missions and surveys in 1980 in member countries;
 - The expanded program for vaccinations in the pilot zone of Koldar, in the Republic of Senegal;
- f) - Studied the first reports of the Scientific Committee.

The council is happy with the climate of fraternal confidence, frankness, and high procedural level that prevailed in all discussions.

All of the delegations of the member countries, the secretary general, and the directors of the OCCGE institutes repeat their sincere thanks to his excellency, Colonel Mathieu Kerekou, chairman of the Central Committee of the People's Revolution Party of Benin, chief of state and chief of the

revolutionary military government, the party, and our brothers, the brave people of Benin, for the warm and fraternal welcome they were accorded during their pleasant stay in this African land of Benin.

Executed in Cotonou, 20 December 1979.

The Administrative Council of the OCCGE.

8255

CSO: 5400

KENYA BORDER WITH TANZANIAN CLOSING DENIED

Nairobi SUNDAY NATION in English 20 Jan 80 p 1

[Article by James Kimondo]

[Excerpt]

THE Health Ministry has refuted reports that Kenya has closed her border with Tanzania to combat the possible spread of cholera to the country.

"The Ministry wishes to announce that Kenya has not closed her border due to cholera," the Head of the Division of Disease Control, Dr. T. K. arap Siongok, who is also the Deputy Director of Medical Services, said in a statement in Nairobi yesterday.

He said: "So far, no positive cholera case has been treated in a hospital."

Kenya's Ministry of Health, Dr. Siongok emphasised, did not require any special health permit such as vaccination certificate against cholera for travellers entering Kenya "even if the traveller originates from infected areas."

He reiterated that on health grounds, the border had not been sealed off but scrutiny on incoming travellers had been improved to facilitate satisfactory medical checking on individuals crossing the border.

Each traveller, Dr. Siongok said, would undergo medical examination and if found healthy but comes from infected areas, would be dosed with antibiotics and allowed to cross.

"If medical examination reveals suspicion of having the disease, traveller would have to give faecal specimens for examination," he further explained.

He said that a traveller could be detained for at least 24 hours to obtain the outcome of the test and if he/she had contacted cholera, the patient could be isolated and treated accordingly.

"So far, Dr. Siongok pointed out, "no one has been diagnosed as having cholera."

CSO: 4/20

ARGENTINA

BRIEFS

POLIO CASES IN SALTA--The Social Welfare Ministry has reported two cases of polio in Salta. The stricken children had not been vaccinated, therefore the ministry ordered a vaccination campaign. [Buenos Aires CRONICA in Spanish 22 Jan 80 p 24 PY]

POLIOMYELITIS CASES--The municipal health secretariat has reported that as of 19 January three children presumably affected by poliomyelitis have been admitted to the Ricardo Gutierrez children's hospital. The three children, all under the age of 4, are from Tucuman, Concordia, and Formosa. [Buenos Aires Domestic Service 1030 GMT 25 Jan 80 PY]

MYSTERY DISEASE IDENTIFIED--The health ministry has issued a report to clarify press accounts about the outbreak of an allegedly unknown virus which attacks babies. This disease has been identified as hemolytic disease of the newborn [síndrome uremico hemolítico], which was discovered in 1955. [Buenos Aires Domestic Service in Spanish 1030 GMT 25 Jan 80 PY]

CSO: 5400

ADMINISTRATION OF ABORIGINES HEALTH CARE QUESTIONED

Prime Minister Orders Probe

Melbourne THE AGE in English 27 Nov 79 p 1

[Report from David Broadbent]

[Text]

CANBERRA — The Prime Minister, Mr. Fraser, has ordered an investigation into what he believes are the poor results of expensive health programmes for Aborigines.

Mr. Fraser has told his department to set up a senior level task force to study increasing criticism that the programmes are not working.

He is believed to be angry about the increasing criticism and is understood to accept that much of it is justified.

Mr. Fraser has told the Minister for Health, Mr. Hunt, the Minister for Aboriginal Affairs, Senator Chaney, the Minister of Social Security, Senator Guilfoyle, and the Finance Minister, Mr. Robinson, to supply manpower and all relevant information.

The internal inquiry will include the impact of Aboriginal housing programmes and the movement back to traditional Aboriginal lifestyles as well as the quantity and quality of health schemes and alcoholism programmes.

Mr. Fraser's order follows a report by the Royal Australian College of Ophthalmologists which said Health Department

programmes had failed utterly to lift the appalling standards of Aboriginal health.

Details of the new inquiry were to be kept confidential but were leaked to Opposition Senator Jim Keefe (Lab, Qld).

Senator Keefe said the inquiry was being kept secret so the Government would not have to consult Aboriginal groups.

Mr. Fraser has told the Ministers the task force should report by April on how Aboriginal health programmes can be changed and improved.

Many Aboriginal health workers see the inquiry as a breakthrough in their attempts to change the way black health problems are treated.

The college of ophthalmologists has constantly criticised the role of the Federal and State Health departments and has been lobbying the Prime Minister's department for a new approach.

In its report on the national trachoma and eye health programme the college condemned as "largely ineffective" the Health Department's efforts and called

for a radical scheme to put blacks in charge of their own health services.

The report said the existence of expensive conventional health services had done little to reduce the dreadful incidence of eye disease, leprosy, VD, ear infections and respiratory diseases amongst Aborigines.

It found that Aborigines had the highest curable blindness rates in the world.

"In spite of the closeness to existing health structures Aboriginal groups do not enjoy what is regarded as a product of these health care systems — freedom from avoidable ill-health," the college said.

Officials of the Prime Minister's Department say the inquiry will also consider the views of Aboriginal groups and Aboriginal medical service workers.

In his letter to the Ministers Mr. Fraser said the review was designed to find out how budget allocations could be spent more effectively.

Outbreak Draws Criticism

Adelaide Advertiser, 20th Feb 1951, in English 1 Dec 79 p 1

[Text] Townsville.--Health Department microbiologists will work through the weekend trying to find the cause of an illness which has left 87 Palm Island--ers--most of them children--seriously ill in hospital.

The outbreak enters its second week tomorrow and has forced the aboriginal reserve's three schools and pre-school to close. Restrictions also have been placed on travel around the island and to and from the mainland.

Eighty-three of the sick are aged between 2 and 9. The other four are adults.

Aboriginal groups in Townsville yesterday called for the resignation of the State Aboriginal and Island Affairs Minister (Mr. Porter) for alleged lack of action on the issue.

Palm Island, 60 kilometres north of Townsville, was established as an aboriginal reserve about 70 years ago. It has a population of 1800 of whom more than half are under 15.

Mr. Porter said earlier this week that many of the island's older inhabitants believed the illness was caused by eating too many green mangoes.

He said the illness appeared to be a variant of salmonella, a food poison.

Mr. Porter said yesterday that his information was that there was no cause for real alarm.

Ignored

Aboriginal and Islanders Community Health Service president (Mr. D. Smallwood) and publicity officer (Mr. H. Aze-

me) said the government had ignored warnings of a high cholesterol count in Palm Island's water supply making it "toxic for human consumption."

Townsville General Hospital Deputy Superintendent (Dr. K. Jaumea) confirmed that some wells on Palm Island were contaminated with E. Coli bacteria.

"But just how many children drank from these wells is not known," he said.

Dr. Jaumea said it was too early to determine if this contamination was significant.

Sixty-eight of the children have been flown to Townsville Hospital and 15 are in Palm Island Hospital. They are suffering from severe diarrhoea and vomiting and most are on intravenous drips.

~~Six in the children at~~ Townsville have recovered but Dr. Jaumea said yesterday they would not be allowed home to Palm Island until the source of the virus was isolated.

Extra medical staff have been sent to Palm Island Hospital and a senior health inspector is taking samples of water, food and other material for testing in Townsville and Brisbane. The illness is not thought to be contagious.

State Health Minister (Sir William Knox) said yesterday that so far bacteriologists and virologists had been unable to determine the cause of the illness in laboratory tests.

The island's reticulated water supply had been tested and found safe. But some old wells were contaminated.

It was possible that water had been drawn from these wells but tests so far had not linked the water with the illness.

Sir William said a possible link with eating green mangoes was one of many possibilities being examined. Because it took 24 to 48 hours to grow cultures for tests, work would continue over the weekend.

Medical staff from Townsville's Aboriginal and Islanders Community Health Service called yesterday for a guarantee of "an uncontaminated water supply" for Palm Island residents.

"We are appalled by the lack of interest and action taken by the State and Federal Governments over the recent outbreak of gastroenteritis of undiagnosed origin," they said.

AUSTRALIA

FEDERAL QUARANTINE RULES DEEMED INADEQUATE, STRENGTHENED

Parliamentary Report

Perth THE WEST AUSTRALIAN in English 21 Nov 79 p 36

[Text] Canberra: Australia's quarantine measures need to be upgraded to meet an increasing disease and pest threat from overseas, according to a Federal parliamentary report.

It says that there are few countries as free of serious animal plagues and plant and pest diseases as Australia.

But it warns that because of the increasing spread of these diseases overseas there is a greater need for an efficient quarantine service in Australia than ever before.

The 81-page report "on the adequacy of quarantine" was prepared by the six-man Senate standing committee on national resources, which is chaired by Senator A. M. Thomas (Lab., W.A.).

The committee's main recommendation is for the creation of an Australian agricultural health service.

It says that the service should be set up within the Primary Industry Department and include

the existing animal, plant and ~~pest~~ quarantine branches of the Health Department, the Bureau of Animal Health and the proposed plant protection service.

PASSENGERS

The report also advocates quarantine checks for overseas passengers and cargo, with the emphasis on first ports of entry.

Other recommendations call for:

- An immediate review of aspects of the coastal surveillance programme, particularly the training of observers, the need for staggered flight times and the provision of the facilities to respond to surveillance sightings.

- Amendment of the Quarantine Act to give quarantine authorities

discretionary power to confiscate, destroy or otherwise dispose of abandoned vessels as a quarantine measure.

The report says that the "tremendous increase" in air travel and goods through trade has exposed Australia's pastoral industries to an ever-increasing risk of the introduction of exotic diseases and livestock and plant pests.

"While quarantine has been relatively successful, the former advantages of being an island continent no longer exist," the report says.

"This requires a reassessment of the idea that quarantine should provide a wall or barrier, and consequently, a re-examination of quarantine requirements to provide a more appropriate basis for the future."

New Search Powers Granted

Perth THE WEST AUSTRALIAN in English 20 Nov 79 p 27

[Text]

CANBERRA: Quarantine officers have been given extensive new search powers under legislation now proclaimed.

They can search baggage of arriving passengers at airports, sea ports and other premises.

The Health Minister, Mr Hunt, said yesterday that amendments to the Quarantine Act also provided for compensation in the event of exotic-disease eradication campaigns.

Owners would not suffer direct financial loss when quarantine authorities had to destroy animals, plants or goods under the Act.

Compensation payments would be based on current market values.

Mr Hunt said that the extensive powers of search now available to quarantine officers would increase the effectiveness of surveillance.

This was especially important because of the big increase in international travellers to Australia after the reduction in air fares.

The compensation and search powers are the second major upgrading of the Quarantine Act this year.

In February, penalties for breaking of quarantine rules were increased to terms of up to 10 years and fines of up to \$10,000.

RESEARCHER TELLS OF RUBELLA RISK FOR MANY

Sydney THE SYDNEY MORNING HERALD in English 10 Nov 79 p 6

[Report from Gregory Turnbull]

[Text]

Many Australian women of child-bearing age were in danger of contracting German measles (rubella), despite the school immunization program introduced in 1970, a senior research fellow of the Children's Medical Research Foundation said yesterday.

Dr Margaret Burgess said it had been estimated that 10 per cent of girls were not vaccinated in the school program, and a further 5 per cent were not protected because of failure to respond to the vaccine.

The immediate danger group was made up of women aged between 23 and about 35 who had not been vaccinated and girls of child-bearing age who had not been protected by the school program.

Dr Burgess said Australia may face a rubella epidemic which could damage up to 1,200 unborn babies.

There had been a large outbreak of German measles in the Northern Hemisphere this year, and it was possible that its incidence in Australia could rise sharply into the summer months.

Western Australia had reported a large number of cases

in the past few weeks, and there were signs of unusual activity in NSW, Dr Burgess said.

The incidence of rubella in the community was difficult to gauge because it was not a severe illness in children or adults and frequently went undiagnosed.

"It may be that we will have an epidemic this year — it is possible," she said.

"There is little doubt that there is rubella about in Australia, but there is nothing dramatic about it at the moment."

Dr Burgess said the school immunisation program had operated superbly in NSW, but it was disturbing that many girls were missed for reasons which included temporary absence from school and parent refusal.

Rubella immunisation is designed to prevent women from becoming infected in pregnancy, when there is a risk that the disease will damage the unborn child, sometimes causing deafness, blindness and other deformities.

Dr Burgess said that in a normal year there are about 40 cases of congenital rubella in NSW.

In a year of epidemic this figure could rise to 400, giving a

national incidence of about 1,200.

The failure of the school program to protect all women was unavoidable, she said.

The solution would be to screen all women for rubella antibodies when they first went to clinics of doctors for contraceptive advice.

The Family Planning Association had adopted this policy, as had an increasing number of doctors.

"If we can get every woman vaccinated, we stand a good chance of eradicating congenital rubella."

However, a disturbing number of mature and reasonably well-educated women had never been tested or vaccinated for the virus, she said.

A spokesman for the NSW Health Commission said yesterday the school immunisation program was not compulsory, but most families accepted the offer.

The rate of acceptance had increased in the past two years since the consent form was printed in eight languages.

The commission recommended that any woman of child-bearing age seeing a doctor for any reason should ask to be tested for immunity to rubella.

AUSTRALIA

BRIEFS

CANCER IN QUEENSLAND--Cancer killed more Queensland children than any other disease, the Queensland University Child Health department head (Dr. W. R. McWhirter) said yesterday. He said one in 600 Queensland children was a cancer sufferer and cancer followed accidents as the most common cause of child death in the State. Dr. McWhirter said that lack of funds meant Australia was not enough involved in cancer research. Without enough research Australia was missing out on the most up-to-date treatment. [Excerpts] [Brisbane THE COURIER-MAIL in English 27 Nov 79 p 7]

TB IN WEST AUSTRALIA--The Public Health Department will run skin tests on schoolchildren and mass X-ray adults in the Denmark area, as a result of confirmation of a case of tuberculosis. The Commissioner for Public Health, Dr J. C. McNulty, confirmed yesterday that a man who was likely to have had wide contact in the Denmark area was in Gairdner Hospital being treated for infectious tuberculosis. About 130 tuberculosis cases were detected each year in WA and 80 or 90 were infectious. [Excerpt] [Perth THE WEST AUSTRALIAN in English 24 Nov 79 p 11]

PRISONER WITH LEPROSY--A 22-year-old Aboriginal prisoner with the most infectious form of leprosy has been transferred from the Bandyup women's prison to the Derby leprosarium for treatment. The woman has been serving a sentence at Bandyup in West Swan since late last year. Dr Randolph Spargo, the officer in charge of the Derby leprosarium, yesterday diagnosed her case as lepromatous, the most infectious form of the disease. [Excerpt] [Perth THE WEST AUSTRALIAN in English 21 Nov 79 p 55]

CSO: 5400

BRIEFS

COLD FEVER--Millions of man hours the world over are lost through workers being laid low with the virus known as influenza. It has, to date, defeated all efforts to stamp it out, due to the fact possibly of its multiple strains. No one vaccine has been adequate, and year after year it incapacitating effects are felt from the Siberian steppes to the Saharan desert. Every so often epidemics sweep through countries; and where they do not incapacitate, they kill, principally the very young and the old. Influenza has become so common and epidemics so frequent that we have come to accept it as a normal feature of our daily lives. That doesn't invalidate its widespread consequences. Paliatives usually are resorted to, which afford relief from some of its symptoms, but do not uproot the cause. Rest and home nursing are usually prescribed with various medicines successfully combating the virus until the patient can resume his normal routine, weakened by the attack but cured of the worst effects. Needless to say, all this has a disastrous effect on economy as well but with the new vaccine that should be available by the middle of this year, all this could be altered. Being of the wide-spectrum variety it will attack all the known strains of influenza, and what is just as much to the point, it is cheaper and safer than any other limited vaccine at present on the market. Physicians also will benefit because all too often their surgeries are filled with patients suffering from influenzal colds, when they could be giving their services to more serious cases, cases in which treatment would be of greater benefit. There have been many breakthroughs in the manufacture of drugs during the last decade, including one for bronchitis. With a cure for influenza as well there will be general relief all round from one of the most pernicious and intractable of complaints, however considered minor in comparison with many others, that is known to the present generation. [Text] [Dacca THE BANGLADESH OBSERVER in English 19 Jan 80 p 5]

CSO: 5400

BRAZIL

BRIEFS

POLIO VACCINATION CAMPAIGN--The Health Ministry has resolved to vaccinate against polio nearly 20 million children under 4 throughout the country. The vaccination will be a crash 1-day operation to be carried out sometime in May. [Porto Alegre Radio Guaiba in Portuguese 0200 GMT 6 Feb 80]

POLIO CASES--In Parana State, specifically in the Ponta Grossa region, 79 cases of polio have occurred, 9 of them fatal. In late 1979 a polio outbreak in that state caused 30 deaths. [PY311717 Buenos Aires TELAM in Spanish 2345 GMT 30 Jan 80 PY]

CSO: 5400

BRIEFS

JAUNDICE IN AZAMGAHR--Three hundred cylinders burst one after another after a leakage in one cylinder set off the explosions. Goddess of Jaundice: Thousands of women on Saturday thronged the bank of the tonas to propitiate Pelia, the goddess of Jaundice. An epidemic has broken out in Azamgarh. Russian Boats for Kashmir: Under a recent Indo-Soviet agreement, a Russian firm will supply two jet-propelled boats for cruising on the Wuller and Manssbal lakes from May. [Text] [Calcutta THE STATESMAN in English 21 Jan 80 p 9]

CSO: 5400

DIPHTHERIA-LIKE DISEASE SPREADS IN CENTRAL JAVA

Jakarta KOMPAS in Indonesian 10 Dec 79 p 16

[Article: "Epidemiology Team Sent To Karanganyar"]

[Excerpts] On 8 December the Central Java Health Service sent an epidemiology team to examine cases of dophtheria in the Karanganyar district.

Director of the public health investigative unit of the Central Java Health Service Drs M. Lufti M.P.H. told this to KOMPAS at his office on 8 December.

Lufti said that even though symptoms indicate that the disease which is spreading rapidly in the Karanganyar district is diphteria, laboratory investigations clearly indicate it is not.

Up through the end of December, 457 patients thought to have diphteria were examined using lab work with results all being negative. This means that no toxin or bacillus has been discovered in the patients.

Therefore the Central Java Health Service has sent an epidemiology team to determine what the disease is that is spreading in the Karanganyar district.

Meanwhile according to reports received by the Central Java Health Service, nine persons are known to have died as a result of the disease by the beginning of December.

Answering KOMPAS questions Lufti explained that to handle the disease which shows symptoms of being diphteria, the Karanganyar district health service has been using the best medicine to treat diphteria and similar diseases.

According to information gathered by KOMPAS from the Central

Java Health Service, from 1974/1975 til 1978/1979 the death figures as a result of diphteria in Central Java is as follows. In 1974/1975 there were 180 cases of diphteria with 34 deaths. In 1975/1976 there were 297 cases and 32 deaths. In 1976/1977 there were 267 cases and 40 deaths. In 1977/1978 there were 919 cases and 11 deaths. In 1978/1979 there were 69 cases and 7 deaths.

7785

CSO: 5400

KENYA

CHOLERA INCIDENCE, PREVENTIVE MEASURES NOTED

Reported Closing of Tanzanian Border

Nairobi DAILY NATION in English 16 Jan 80 p 1

[Text] Kenya has sealed off its border with Tanzania to combat possible spread of cholera to the country.

The move, according to confirmed sources yesterday, was made last Saturday and took scores of travellers to Kenya by surprise.

It is understood that the border closure will remain in force until the Government receives assurance that the killer disease has been brought under control in Tanzania.

Cholera, which first hit several parts of Tanzania a couple of years ago and erupted again last December, has claimed scores of lives in that country forcing the government there to impose strict measures against travellers to and from the affected areas.

The areas severely hit by the epidemic are the Mbeya region and parts of Tanga bordering Kenya.

"These measures were taken to prevent chances of the disease coming to Kenya because the Government does not want to see a repetition of the calamities when Kenya lost a few lives," the source said.

Among the border checkpoints which have been closed are Lunga Lunga, Taveta and even Namanga. Because of this, travellers from Tanzania would be required to have special permits for crossing the border.

Between Saturday and yesterday, several people have been turned away from the Kenyan border points.

The first to be affected by the border closure was a Tanzania government delegation last weekend on its way to Mombasa for an official meeting.

Case Established at Murabani Village

Nairobi DAILY NATION in English 17 Jan 80 p 3

[Text]

ONE positive case of cholera has reportedly been established at Murabani Village in Taita/Taveta District.

According to informed sources the whole area has been "combed" and 15 people taken to Taveta Hospital for examination.

The man found suffering from the disease was identified by the sources as Mr. John Arwa, a Tanzanian believed to have recently crossed the border into Kenya.

However, the sources said, the situation was under control and there was no cause for alarm.

Other sources said that Dr. Muga, who is in charge of Taveta Hospital, travelled to Arusha yesterday morning for a meeting with Tanzanian officials in an attempt to find ways and means of stopping the disease from spreading.

Before travelling to Arusha, Dr. Muga called for more vehicles and manpower to reinforce his cholera team.

"Efforts are to have everyone in the area checked to establish that there were no more cholera cases," he said.

In March last year, cholera killed some people in Taveta.

The present case in Taveta came five days after Kenya reportedly sealed off its border with Tanzania to combat possible spread of cholera.

It is understood that the border closure will remain in force until the Government receives assurance that the disease has been brought under control in Tanzania.

Among the border points which have been closed are Lungu, Lungu Taveta and Namanga. Travellers from Tanzania would now be required to have special permits for crossing the border.

No Serious Cases in Coast Province

Nairobi DAILY NATION in English 19 Jan 80 p 5

[Excerpt] Sources in Mombasa said there had been no serious cases of cholera reported in Coast Province, apart from one or two cases in Taveta District earlier in the week. "These cases are understood to have come from Tanzania," the sources added.

During his public meetings in Kwale District yesterday, Mr Mahihu appealed to people living on the Kenya-Tanzania border to take special precautions in their contacts with travellers from Tanzania so the Coast Province is kept free from cholera.

It was the responsibility of Kenyans on the border to report any symptoms of cholera in their areas to the nearest police station or health center, he added.

Mr Mahihu also appealed to Tanzanians near the border to help their health authorities combat the spread of the epidemic before the problem becomes serious.

He said one of the best ways for people to avoid cholera infection was to observe hygiene and keeping the environment clean. People should also boil drinking water.

Coast Cholera Incidence Denied

Nairobi SUNDAY NATION in English 20 Jan 80 p 3

[Excerpts]

THERE is no outbreak of cholera at the Coast, area PC Eliud Mahihu, has said.

Addressing district leaders at Kwale County Council hall on Friday, Mr. Mahihu refuted a newspaper report that a cholera case had been confirmed in Taita-Taveta District.

The PC said that immediately the story appeared, an urgent survey was carried out by a team of medical officers led by the provincial medical officer, but no cholera case was either confirmed or suspected.

"According to information I have from the local PMO there is no outbreak of the deadly disease in this province. There is no cause for alarm," the PC assured the leaders.

CSO: 4420

MOZAMBIQUE

BRIEFS

CHOLERA OUTBREAK--An outbreak of Cholera in Mozambique has spread to the district of (Chimoyo), which includes a center for Rhodesian refugees who were due to be repatriated before the general election in this country. A spokesman for the Office of the United Nations High Commissioner for Refugees says the report about the disease gives cause for concern. Some 65,000 of the 150,000 refugees said to be in Mozambique are reported to be in the (Chimoyo) area. It is one of four Mozambique areas which have been declared newly infected by cholera. During the last 3 weeks, there have been a total of 688 cases in Mozambique, with 67 deaths. [Text]
[LD191206 Salisbury Domestic Service in English 0400 GMT 19 Jan 80 LD/CA]

CS0: 5400

OUTBREAK OF CHILDREN'S DIARRHEA REPORTED IN SOUTH TAGALOG

Manila BULLETIN TODAY in English 21 Dec 79 p 39

[Article by O.V. Masaganda]

[Text] All medical officers of the PC/INP in Region 4-A (Southern Tagalog) have been alerted on the heavy outbreak of diarrhea cases in the region affecting mostly children up to five years old.

Col. Edgardo Saul, regional medical chief, informed Brig. Gen. Andres B. Ramos, Region 4-A commander that the 10 provinces within his area including the island provinces of Palawan and Romblon had the most number of cases.

Among the most badly needed medicines, according to Colonel Saul, is cough syrup. He ordered all the PC provincial medical officers to coordinate with the provincial and municipal health doctors and conduct checkups of barangay inhabitants, especially in the depressed areas.

On the other hand, provincial health officer Dr Hilarion Tan said he has sent additional boxes of medicines to Polillo island towns for distribution to the barrio people. Polillo, Jomalig, Patnanungan, Burdeos, Panukulan were hit by a strong typhoon late last year and are considered depressed areas in Quezon.

Here in Lucena, all hospitals are full of patients mostly confined for diarrhea. City health officer Rosalina Radovan advised to dress their children in thick clothes for protection against the present cold weather which, she said, is conducive to contracting diarrhea.

CSO: 5400

PHILIPPINES

BRIEFS

RABIES DEATHS IN NUEVA ECIJA--Dogs in Nueva Ecija are striking back and fatally at that, which somewhat checks dog meat lovers here from partaking of the fancied delicacy. Reports reaching the local office of the bureau of animal industry showed that some 20 persons from this city and elsewhere in the province have died from the bites of rabied dogs in the last few days. The victims were reportedly from this city, Zaragoza, Cuyapo and Aliaga. It was learned that the Philippines has the highest mortality rate in rabies deaths in the world. Nueva Ecija has the highest death rate. Dr Ruben Hernandez, provincial veterinarian, has appealed to dog owners in this city and elsewhere in the province to bring their pet dogs for immunization to the local BAI field workers. There are reportedly some 140,000 dogs in Nueva Ecija. [Text] [Manila BULLETIN TODAY in English 22 Dec 79 p 35]

CSO: 5400

RHODESIA

BRIEFS

TSETSE FLY BAN REINTRODUCED--Tsetse fly chambers and barriers have been reintroduced at Makuti and Chirundu, the Department of Veterinary Services said yesterday. "Since the reopening of the Chirundo Bridge there has been an increase in the volume of traffic, particularly heavy, slow-moving transport carrying maize and other goods to Zambia. "Because of this movement there is an increased risk to cattle in the Karoi and Sinoia farming areas," the spokesman said. [Text] [Salisbury THE HERALD in English 29 Jan 80 p 7]

CSO: 5400

BRIEFS

ANTI-MALARIA CAMPAIGN--In the context of the effort to provide a better healthy living for the citizens, the project to develop local communities of the Ministry of Social Affairs and Labor has embarked on an anti-malaria campaign in about 17 villages in the Provinces of Nazwa and Abra' with the cooperation of the Preventive Medicine Department of the Ministry of Health. The people working on this campaign, most of whom are social and public health guides, in addition to public health teams belonging to the public health communities in the two provinces, began their work last Tuesday. The campaign has concentrated on holding symposiums and presenting films, all stressing public health and means of combatting malaria. These teams have also distributed preventive medicines, filled swamps and sprayed ponds in the villages of the two provinces. It should be pointed out that this campaign will take 2 weeks. /Text/ /Muscat AL-WATAN in Arabic 31 Dec 79 p 2/ 18877

CSO: 4802

BRIEFS

CHOLERA OUTBREAK IN KITGUM--A cholera outbreak which killed at least 25 people in Kitgum District in the last week of December is being fought. This was said by the assistant district commissioner, Mr B. E. Odwee. The areas which had been hit are Agoro, Namokora, Palunga and Madi Opei. "The deaths were confirmed by the district medical officer, Dr Rozzo with whom I toured the affected areas extensively," Odwee told the UGANDA TIMES. "As soon as the outbreak was known, Rozzo mobilised his medical team to undertake mass cholera vaccinations in the district. The exercise is still continuing but the situation is now under control. No further deaths are being reported," Odwee said. The ADC said many patients had been discharged from Kitgum Hospital and other health centres and dispensaries on December 31. [Eva Lubwama] [Excerpt] [Kampala UGANDA TIMES in English 5 Jan 80 p 1]

CSO: 5400

FLU EPIDEMIC HITS SOVIET UNION

Stockholm SVENSKA DAGBLADET in Swedish 5 Jan 80 p 11

[Article by Kjell Dagnes: "Flu Hits Soviet Union"]

[Text] Moscow (SvD). The flu is unleashed: Almost all over the Soviet Union. Sweden has escaped--thus far, but the flu interfered with the week end plans of many.

This time, a virus of Type A has hit the Russians. Nobody escapes, neither children nor adults. Fortunately, however, the worst seems to be over in the large western cities, reports the All-Union Influenza Institute of Leningrad.

The alarm was sounded first in Kishinow, capital of Moldavia, early in November. Later, the virus hit Odessa, Lvov, and Kiev, reaching Moscow before Christmas.

In this case, the flu is spreading eastward, toward Siberia, Central Asia, and the Far East. If not with the speed of light, at least with great speed.

Computers in the Leningrad institute have established that the spread occurs along the domestic flights of Aeroflot. These stowaways are not easy to discover or get rid of.

Poor Weather a Factor

The A influenza has not appeared for several years, but in the opinion of medical men the unstable weather of last fall, alternating between rain and frost, contributed to reducing the people's resistance.

Preventive measures have been initiated. Mass vaccinations with killed, weakened viruses have been undertaken in day homes and hospitals and among persons who encounter crowds in their work. Last year the Soviet Union produced a total of 2.15 million doses of influenza vaccine.

Experience of earlier test vaccinations has shown that incidence of the disease is close to 3.5 times less among those vaccinated. But there is still some way to go before there is vaccination for all, as Brezhnev claimed 4 years ago.

Incidentally, Brezhnev himself had a touch of the flu when before Christmas he was forced to cancel his official duties during the visit to Moscow of Angola President Dos Santos Avila.

High Fever, Coughing

Even though vaccination helps it is not fully effective, the influenza institute admits. The reason is that the influenza virus can within a short period of time alter its genetic properties, and the vaccine does not then work as well. The Russian influenza is characterized by high fever, even up to 40 C, during the first two or three days. Then comes the cough, the running nose, and the sore throat. Generally, however, the illness lasts no longer than a week.

To avoid being struck, people should themselves take "prophylactic steps" says medical advice in the press. Among other things, toughening oneself by being outdoors in all kinds of weather helps, if one only keeps feet dry, according to health advisor M. Ignatiev in RED STAR.

11256

CSO: 5400

CHOLERA SPREAD REPORTED IN KALEMIE

Lubumbashi MJUMBE: LE QUOTIDIEN DU SHABA in French 2 Nov 79 p 8

[Text] After reporting yesterday that Kalemie had again become a victim of cholera, we have some more information which was sent to us by our permanent correspondent in Tanganika.

Since mid-October, the inhabitants of this lake-lying city and its surrounding areas have been seriously endangered by severe diarrhea, at times accompanied by vomiting and acute lower abdominal pain, which is presently claiming many victims.

Since the onset of this situation, more than 80 patients have been admitted to the general hospital, where they have been meticulously examined in an attempt to uncover the origin of the disease. Every day, at least four to six new cases have come to the hospital.

In addition to those reported and treated at the hospital, there are also, unfortunately, many unreported cases in the districts and surrounding villages, and each day approximately three to four people, both children and adults, die at home.

According to those in charge at the local clinic, this is a recurrence of the cholera epidemic, which was not totally wiped out since its outbreak last May.

From time to time, they continued to report several suspicious and isolated cases of cholera. For, as it was further determined, it was from a vibrio known as "ELTOR" which remains for a long time as a living organism in the carrier's gall bladder.

It was that same vibrio which reached Kalemie last year, taking many victims.

However, this important fact is also worthy of mention: a starting point for the misfortune befalling the people of Kalemie and the surrounding areas was the general power failure, following a breakdown at SNEL, which

that city suffered from October 10-15, 1979. Without electricity, all of Kalemie inevitably had no water for about seven days, with all the results that went with it.

Because of the power failure, all of the inhabitants, without exception, were forced unwillingly to use the lake for bathing, cleaning, washing clothes, dishes, etc. Every household used the same water, and some families drank it without boiling it first. What was even worse was that the Kalemie REGIDESO [Water and Power Distribution Administration] no longer dispenses chemical products for the treatment of water.

Faced with that situation, the local authorities could not remain indifferent. The people were immediately urged to be vaccinated and to heed advice on hygiene. However, one wonders whether the vaccine is not outdated, due to the general power cut-off to the village.

Meanwhile, medicines are seriously lacking, and this further explains the large rise in the death toll.

9475

CSO: 5400

VACCINATION PROGRAM EXPANDED IN LUBUMBASHI

Lubumbashi MJUMBE: LE QUOTIDIEN DU SHABA in French 9 Oct 79 pp 1, 8

[Excerpt] The expanded vaccination program has begun the second stage of its campaign since October 4, 1979 for the entire Lubumbashi subregion. It is for children from 3 months to 3 years of age, and includes:

- 1) BCG - for tuberculosis
- 2) Diteper - diptheria, tetanus, whooping cough
- 3) Antipolio - for polio

The DTP and polio vaccines are to be administered in three doses at intervals of no less than 4 weeks and no more than 6 months. The measles vaccine will be given at one time to all children from 9 to 24 months.

Women with children in that age group are asked to report to the places on the appointed days, along with their vaccination cards, infant hospitalization records, or other cards listing all previous vaccinations.

9475
CSO: 5400

BRAZIL

BRIEFS

CATTLE RABIES OUTBREAK--Recife--The Agriculture Secretariat of Pernambuco State has confirmed that an outbreak of cattle rabies has been detected in the northernmost part of the state. The Agriculture Secretariat indicated, however, that the outbreak was under control. [Rio de Janeiro JORNAL DO BRASIL in Portuguese 23 Jan 80 p 8 PY]

CSO: 5400

COLOMBIA

BRIEFS

FOOT-AND-MOUTH DISEASE--Jose Maria Jimenez, deputy director of the livestock production office of the Colombian Agricultural-Cattle Institute, has stated that foot-and-mouth disease has been detected in 1,550 farms and that only 30 percent of the cattle in the nation have been vaccinated against vesicle diseases. [Bogota Cadena Radial Super in Spanish 1100 GMT 11 Jan 80 PA]

CSO: 5400

SOUTH AFRICA

BRIEFS

NEW CATTLE VACCINE--South Africa is to produce its own vaccine against Foot and Mouth disease, the most dreaded killer of livestock and wild animals. Previously South Africa imported supplies from overseas source. The breakthrough was announced by the Onderstepoort Veterinary Research Laboratories in Pretoria with the news that a R6,5-million research laboratory had been completed. A laboratory spokesman said that military style security would be a hallmark of the building in view of the highly infectious nature of the disease. He said the 60 personnel working in the centre would be subjected to strict regulations because, although they could not be affected by the virus, they could carry it. Security precautions in the research centre included complete changes of clothing when moving from one part of the laboratory to another and disinfecting showers and controlled movement through areas with airtight and electrically controlled doors. [Text] [Johannesburg THE CITIZEN in English 22 Jan 80 p 13]

CSO: 5400

UGANDA

BRIEFS

RINDERPEST VACCINES FOR KITGUM--The ministry of animal industry and fisheries has been urged to speed up the delivery of livestock vaccines to Kitgum District to help control rinderpest. The call was made by the acting district veterinary officer, Mr J. Odimim. Kitgum is one of the districts which were placed under quarantine following an outbreak of rinderpest last month. Odimim said about 80,000 heads of cattle and 40,000 goats were in danger. He complained of poor communication between the district and the veterinary headquarters in Kampala. "The most important thing now is to speed up vaccines deliveries to save the animals. Odimim feared that the outbreak would spread unless efforts to contain it were intensified. "The ministry recently sent in 26,000 doses of vaccines but this is not enough." He said other diseases such as "Newcastle" were attacking the animals particularly poultry. "Lack of drugs for this disease and the scarcity of feeds have destroyed poultry farming." [Text] [Kampala UGANDA TIMES in English 5 Jan 80 p 8]

CSO: 5400

INTER-AMERICAN AFFAIRS

PANAMA, MEXICO RESOLVE TO FIGHT COFFEE RUST DISEASE

PA150316 Panama City Domestic Service in Spanish 1700 GMT 14 Jan 80 PA

[Text] The agriculture ministers of the Central American countries, Panama and Mexico met in Mexico City to analyze the problem of coffee rust disease in the area.

Francisco Rodriguez, Panamanian agriculture development minister, represented Panama at this important meeting of coffee producing countries. Minister Rodriguez made the following statements to this station in connection with this meeting:

[Begin recording] The agriculture ministers of Central America, Panama and Mexico were invited by the Mexican agriculture secretary to a meeting, which they held last week from Monday to Wednesday, to discuss the problem of coffee rust disease in Nicaragua and El Salvador. As you all realize, coffee rust disease is a very serious plague which is affecting the economy of these two countries and which could eventually affect the other countries of the area where coffee production is of great significance to their economy.

All the ministers who attended this urgent meeting believed that the problem should be handled by member countries of the International Regional Organization Against Plant and Animal Disease (IRIA), which comprises the Central American countries, Panama and Mexico. Thus it is not just a problem affecting Nicaragua and El Salvador.

At present, the disease is only affecting Nicaragua, which has had the plague for the past 2 and 1/2 years, and El Salvador, where it appeared recently. The area affected by this disease is approximately 15,000 hectares in both Nicaragua and El Salvador.

As you can see, the areas affected by the disease are considerable and the expense involved to eradicate it will amount to hundreds of millions of dollars. Besides, there is still the risk of not eradicating the disease after spending all that money.

After considering the financial resources and technical requirements involved in such a program, the agriculture ministers suggested that the best thing to do for the time being was to set up a control program instead of an eradication program. The control program will consist of enforcing quarantine measures and other regulations to prevent the spread of the disease to other countries. Other measures will also be implemented to reduce the possibility that other elements, besides man's direct contact will contribute to the spread of the disease. We have had to get used to living with the disease because its eradication as far has been out of the question.

Important resolutions have been approved for all countries in the area. For example, the areas affected by the disease will be subjected to strict control and receive financial aid for fumigation programs to try to eradicate the disease as much as possible. In the areas not affected by the disease, security zones--quarantines--will be established to restrict the entry of persons, vehicles and other means of transportation which could carry the disease. [end recording]

Minister Rodriguez said that the Central American countries, Panama and Mexico have the financial and technical support of the Inter-American Development Bank (IDB), UN FAO and other international organizations to carry out these plans.

CSO: 5400

AUSTRALIA

BRIEFS

LOCUST SWARMS REPORTED--Plague locust swarms are out of control in the Coonabarabran area, according to the NSW Department of Agriculture. A locust control spokesman, Mr Terry McHugh, said yesterday severe damage to crops and pastures was almost certain unless there were massive "fly-outs" of locusts from the Coonabarabran Pastures Protection Board district. Swarms could be found in about 75 per cent of the district and more were flying in each day. Mr McHugh said air and ground spraying had been very successful in southern areas of the State. The number of locusts reaching the fledgling stage was not as great as expected. [Excerpts] [Sydney THE SYDNEY MORNING HERALD in English 29 Nov 79 p 3]

FUNGUS THREAT SPREADS--A fungal root disease which is decimating Australian forests has spread to Melbourne parks and home gardens. The fungus, *Phytophthora cinnamomi*, killed one in 10 trees in West Australian jarrah forests, has now been found in the Botanic Gardens and in plane trees along St. Kilda Road. Government plant pathologist, Mr. Frank Greenhalgh said yesterday that *Phytophthora* had hit most Melbourne gardens and some commercial nurseries. A senior Melbourne University botanist, Dr. Gretna Weste, called for Government controls over the nurseries and other possible sources of infection. Mr. Greenhalgh, of the Burnley plant research station, said symptoms of the fungus were poor growth and wilting, yellowing and dieback of the leaves. The fungus was identified in Victoria in 1964 and has spread to the Brisbane Ranges, the Grampians, where it threatens wild flowers, Gippsland and Wilson's Promontory. In a forest infected with fungus, sometimes known as jarrah dieback, vehicles are usually washed to stop the spread of contaminated earth. [Excerpts] [Melbourne THE AGE in English 7 Nov 79 p 14]

CSO: 5400

BRIEFS

PESTICIDE FOR POTATO DISEASE--The late blight disease of potato and powdery mildew of KUL spread rapidly due to weather conditions of humid low temperature and the cloudy sky with light rainfall says a PID handout. Late blight of potato disease causes brownish colour in the leaf margin at the beginning and then shows blackish spots on leaves and other parts of it. The plant stands withering and ultimately dies. Blackish powdery masses appear on the lower surface of the leaf of affected KUL plant. The leaf also shrinks slightly and discolours the immature fruits draps. Potato crop and KUL plant may be sprayed at an interval of 10 days with 607 teaspoons of Dythane M-45 of Copper oxichloride mixing in 12 1/2 seens of water as preventive measure. In case of KUL the fungicide Thiovit may be applied for quick results. [Text] [Dacca THE BANGLADESH OBSERVER in English 4 Jan 80 p 3]

CSO: 5400

COSTA RICA

PLAGUES POSE GRAVE THREAT TO NATION'S ECONOMY, PAPER SAYS

San Jose LA REPUBLICA in Spanish 15 Jan 80 p 4

[Text] "We were unable at that point to eradicate the disease. Even though very great efforts were made in terms of manpower and funds, it was our feeling that in time, but we did not know how long, black sigatoka would get to the banana plantations," stated Johnny Rojas, the assistant manager of the National Banana Growers Association (ASBANA).

Mr Rojas is on the commission that President Carazo appointed in November to coordinate the destruction of banana crops with black sigatoka in the San Carlos region and to prevent the fungus from reaching the banana groves.

In addition, Alvaro Jimenez Castro, the executive president of the Coffee Office, pointed out that there were increased possibilities that rust would reach the country's coffee plantations; this was because El Salvador announced that it would be impossible to continue battling this disease. "El Salvador has decided to live with the rust," Jimenez said.

The president of the Industrial Sugar Cane League (LAICA), Julian Mateo, indicated that Messrs Golcher and Guzman from the league recently returned from Nicaragua, where they were conducting an investigation, and reported that charcoal rot, a disease that attacks and destroys sugar cane, has reached critical proportions in our neighbor. Moreover, the chances were quite good that it would cross over into Costa Rica.

In light of this situation and considering that the country earns about 3.4 billion colones a year from sales of these three products, the appearance of these diseases would deal a very harsh blow to the national economy.

Black Sigatoka

This disease appeared in a number of banana groves in San Carlos and was discovered on 16 October.

So far, 24 million colones have been spent to control black sigatoka, and according to the estimates of the Agriculture and Livestock Ministry (MAG), an additional 10 million would be needed to eliminate another 1,200 hectares of contaminated bananas.

Some 1,200 growers have been affected, and they have been given compensatory funds for the losses they have suffered in their banana harvests.

In addition, the Joint Institute of Social Assistance (IMAS) reported that it is preparing an emergency aid program for the families that reside in the Suka region.

"Even though we know that the sigatoka is in the central valley, we are continuing with the policy of eliminating the points of outbreak, because the initial costs of the program were very high," the assistant manager of ASBANA stated.

The program consists of enforcing a quarantine in a disease control belt around the nearest banana plantations in Rio Frio. Disease control posts have been set up in Ochomongo and Siquirres. Nothing else could have been done because there is no preventive means available. In addition, there are no banana varieties that are resistant to black sigatoka.

Meanwhile, the transnational corporations are preparing to combat the black sigatoka in banana groves with a new fungicide called "Bravo," but these efforts will considerably boost production costs.

Standard reported that overall outlays to control black sigatoka total 34,170,930 colones, and the Banana Development Corporation of Costa Rica said that it is investing 2 million colones just to apply the new fungicide Bravo.

Standard representatives indicated that they need to buy planes with greater carrying capacity, because they have to intensify the fumigation, which must be undertaken every 12 days with the new product.

Santos Herrera, from the Plant Disease Control Division of MAG, explained that black sigatoka attacks the leaves; the production of the plant drops considerably; the bananas themselves are small (about the size of a finger); the quality diminishes, and the ripening comes early.

Santos Herrera feels that in the event that black sigatoka were to invade banana plantations, the economic consequences would be disastrous, because Costa Rica is currently one of the leading

exporters of bananas, which constitute our nation's second largest source of foreign exchange.

Mr Herrera added that bananas are more susceptible to attacks by the fungus than other Musaceae, which would mean that major outlays for agricultural chemicals, equipment and manpower would be needed to have satisfactory harvests.

Coffee Rust

There are also increasing chances that rust will appear in coffee plantations. Mr Alvaro Jimenez says that "if they decide to live with the rust in Nicaragua (and according to the information that we have, it is now very difficult to eradicate it), our quarantine will not be enough; investigations to find and destroy rust outbreaks will be of no use, and we will have to live with it too."

The executive president of the Coffee Office adds that if we live with the rust, we will have two parallel and non-exclusive options. First, given the technical capability of our growers, they can be taught how to combat the disease. For example, they can be told what kinds of fungicide to use and how to apply them, just as we are battling 'rooster's eye' today, but this would mean an increase in the coffee grower's costs.

Secondly, we could also plant varieties that are resistant to the rust, such as the so-called Katimor, which is a cross between a variety called Timor and another called Katurra.

It is now being grown on experimental parcels, and a few seeds have been distributed to establish multiplication fields at various sites.

"Costa Rica is prepared to combat the rust. Nevertheless, we are going to continue tightening the quarantine that is being applied in the country and continue investigating," Jimenez concluded.

Sugar Cane Rot

The rot is a disease that appeared for the first time in the Western Hemisphere in Argentina in 1940. It has also appeared in Brazil, Paraguay and the Dominican Republic. It is now along the southern border of Nicaragua.

It currently represents a threat to the sugar cane plantations in Guanacaste, which account for 30 percent of the total output that the Tempisque Sugar Mill uses to produce sugar and anhydrous alcohol.

The characteristic symptom of the charcoal rot is the formation of a whip-like spike emerging from the top of the cane stalk. Its length varies; it has the thickness of a pencil, with no branching, and contains millions of spores. The membranous covering eventually ruptures and exposes the fruiting bodies of the fungus, which looks like a thick layer of soot. The spores are disseminated mainly by the wind.

According to the president of the Sugar Cane League, the problem is that there is no resistant variety that can adapt to this country's conditions.

The charcoal rot apparently began in Belize, moved into Honduras and then entered Nicaragua.

The proper authorities are taking appropriate measures to protect the sugar cane plantations in the northern region.

The various people interviewed feel that the three plagues could have disastrous consequences for the country's economy. There are several common denominators in the three diseases, a drop in production and increased output costs, for example.

In Guatemala, a transnational banana company lost 50 percent of the country's total output because of black sigatoka.

The losses to Costa Rica, whose economic foundation consists of bananas, sugar cane and coffee, would be incalculable.

8743

CSO: 5400

BETEL VINE HIT BY MYSTERIOUS DISEASE

Madras THE HINDU in English 19 Jan 80 p 13

[Text] A mystery disease is leading to the extinction of betel vine gardens in Ponnur area of Guntur district in Andhra Pradesh.

First the leaves lose their lustre and then turn yellow. The vine starts withering and the roots begin to rot. Finally the plant is dead. The farmers who have not been able to locate any pest or insect on the leaves, stems or roots have concluded the havoc is being caused by a disease still undiagnosed. Attempts to control it through use of pesticides have failed.

A visit to Ponnur and Chintalapudi shows the farmers are concerned over the euthanasia which has overtaken the gardens.

In a belt of half a dozen villages--Mulukuduru, Machavaram, Chintalapudi, Ponnur, Nidubrolu, Kasukurru and Aluru--betel vines are raised in about 1,100 acres. Each farmer cultivates half an acre on an average because of the huge investment of Rs. 15,000 required to raise a one-acre garden. Once a garden is raised it yields for three years. The lease amount per acre is as high as Rs. 5,000.

Betel leaves from Ponnur area are exported mostly by road to Maharashtra, UP and Punjab. The exports in the season, January to May, come to about 5,000 baskets, each basket having about 3,000 leaves.

According to Mr. K. Krishna Reddi, President of the Guntur District Betel Leaf Producers' and Exporters' Association, already some 40 acres of gardens have been laid waste by the disease and it is a question of time before other gardens are hit. He would like the Government to rush plant protection specialists and save the gardens. They would also like the Government to start a research centre in Ponnur, which accounts for the bulk of production of betel leaves in Andhra Pradesh.

Mr Krishna Reddi, who himself has lost the betel vines in a two-acre plot, says he tried in vain to stem the rot by applying neem cake. His finding

is that the crop in the second year is more vulnerable than others. A similar disease had led to the extinction of betel leaf production in Tuni area some years ago. After a gap of some years, the farmers planted the crop again.

The importance of betel leaf gardens can be gauged from the fact that about 3,000 families have migrated from different parts of Andhra to Ponnur area to work as labourers in the different processes ranging from plucking to packing and earn their livelihood.

CSO: 5400

INDONESIA

COCONUT TREES INFESTED BY SEXAVA IN MALUKU

Jakarta KOMPAS in Indonesian 10 Dec 79 p 6

[Article: "In Maluku 4.3 Million Coconut Trees Infested By Sexava"]

[Excerpt] During the past 3 years in Maluku at least 4.3 million coconut trees have been infested by the Sexava plant disease. As a result production has decreased.

Information gathered by ANTARA from the Maluku Province Plantation Service in Ambon indicates that infestation by the Sexava plant disease, which is widely known for its intensity, has spread among coconut trees owned by farmers in an area covering 429.98 hectares.

The area affected by the Sexava infestation includes the North Maluku district which is the most seriously affected area, followed by the administrative areas of Central Halmahera and Southeast Maluku.

The number of coconut trees destroyed as a result of the infestation in North Maluku is listed at 3,020,517 trees over an area of 15,102.58 hectares. There have been 647,000 trees destroyed in Central Halmahera, 562,510 in Central Maluku and 102,460 trees in Southeast Maluku.

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CSO: 5400

JAMAICA

NEW DISEASE KILLS TOBACCO PLANTS

FL211045 Kingston DAILY GLEANER in English 18 Jan 80 p 1 FL

[Text] A new disease of tobacco, which was discovered in Jamaica recently, has already wiped out a considerable amount of seedling material and is threatening the industry.

The disease, the blue mold, or downy mildew of tobacco was first noticed in seedbeds in the tobacco-growing areas of Clarendon about six weeks ago and identified by the plant protection department of the Ministry of Agriculture.

So far the disease has virtually overwhelmed tobacco nurseries in some areas and this is expected to lead to a serious gap in production of tobacco at least in the short run. Frantic efforts are now being made to secure the chemicals necessary to control the disease. It is not expected that the disease can be totally eradicated.

Technical reports of the disease, caused by a fungus, are that it may be identified in the seedling tobacco by the appearance of small patches of seedlings with erect leaves. Later the plants die rapidly.

On older plants, the disease is characterized by round yellowish areas on the leaves. The leaves become cupped, and underneath the spots there is a blueish downy mold growth. The plants then begin to turn brown and eventually die.

Although the disease had been hitherto unknown in Jamaica it has made appearances in several other areas of the world. It was first described from Queensland, Australia in the 1800's and was observed in Argentina in 1891.

In 1958 it was noticed in greenhouses in Britain on tobacco being used for virus tests. The following year it was reported in greenhouses in Germany and the Netherlands. By 1960 it was in 11 European countries and did over \$25 million damage to tobacco cultivations that year.

The nearest to Jamaica that an outbreak was hitherto reported was in Cuba, where it made its appearance in 1957 and did considerable damage to the tobacco industry there in 1958.

Tobacco blue mold has been reported from almost every major tobacco-growing area in the world and remains endemic in several of these.

The fungus causing the disease is reported to be capable of surviving in other crops such as tomato, pepper and egg plants. This is therefore one of the few diseases of economic plants in Jamaica which is capable of surviving on alternate host plants.

CSO: 5400

CUBANS LIKELY TO SPRAY BANANAS

FL261725 Kingston DAILY GLEANER in English 23 Jan 80 p 1 FL

[Excerpts] The Cuban authorities have completed a study of banana spraying operations here and have made a proposal to do contract spraying for the Banana Company of Jamaica.

The proposal is now being examined by the company, especially in relation to the foreign exchange factor that would be involved if the Cubans are given the contract to carry out the leaf spot control operations here.

Managing director of the Banana Company of Jamaica, Mr Anthony Capleton, told the GLEANER yesterday that no decision has yet been made but added that the Cuban proposal appeared competitive.

He said that following persistent complaints about the quality of leaf spot control being effected by the current holders of the contract, Crop Culture Limited, the company had promised to look into alternative ways of controlling the disease. Approaches had been made to the Windward Island Banana Company (WINBAN), and the Jamaica Defence Force, but these were not successful.

Consequently, he said, the Cubans had been invited to examine the situation to see if they could be of assistance. As a result they completed a survey and prepared the proposal.

However, Mr Capleton said, there would be no question of the Cuban aircraft being kept on airstrips. In the first place, they feared certain elements may try to damage the planes and in the second place the Banana Company of Jamaica would be unable to arrange the security needed.

Therefore, he said, if the Cubans are offered the contract their aircraft will be kept at an international airport where right security can be maintained.

Mr Capleton said he was not approaching the matter from a political point of view. "I am here to promote leaf spot control," he declared. (passage omitted).

Should the Cuban banana connection go through nearly 70 Jamaican workers are likely to lose their jobs.

Expert opinion is also sceptical about the suitability of the planes that the Cubans would be using in the control programme. While the aircraft are felt to be unsuitable for that type of operation the twin-engine craft, made in the Soviet Union under licence, has the capacity to carry about six to eight passengers or other cargo.

The GLEANER understands that the Jamaican authorities have also been canvassing other spraying assignments for the Cubans.

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